PAGE 1 / 10

Image# 201607129020406017

**FEC** 

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3X	For Otl	her Than An	Authorized	I Committ	ee		Office Use	e Only	
1. NAME OF COMMITTEE (in 1		OR PRINT ▼		mple: If typi r the lines.	ng, type	12FE4M!			
CardioVascular	Coalition, In	c. Political A	Action Cor	nmittee					
ADDRESS (number and		S. Boulevard							
Check if diffe than previous reported. (AC	ly Tami	pa				FL	33606		
2. <b>FEC IDENTIFIC</b>	ATION NUMBER	<b>~</b>	CITY ▲		;	STATE 🛦	- 2	ZIP CODI	<b>E</b> ▲
C C00591826			3. IS THIS REPORT	\ <u>/</u>	NEW (N) <b>OR</b>	A (A	MENDED		
July 15 Quarterly October Quarterly January 3 Year-End July 31 M	orts:  Report (Q1)  Report (Q2)  15  Report (Q3)  31  Report (YE)  //id-Year Jon-election	Monthly Report Due On:  12-Day PRE-Electio Report for t  4  30-Day POST-Elect Report for t	Election on	ĕ	(12C)	Sep	(12S)	in the State of	Nov 20 (M11) Non-Election fear Only) Dec 20 (M12) Non-Election fear Only) Idan 31 (YE) Runoff (12R)
Terminati (TER)	on Report		Election on	M = M /	D   D /	Y . Y . Y . Y		in the State of	
5. Covering Period	04		016	through	06	30	/ Y Y 2010		
I certify that I have ex	amined this Repo	rt and to the be	est of my kno	wledge and	belief it is tru	ie, correct ar	nd complete	).	
Type or Print Name of	Treasurer Nanc	cy H. Watkins							
Signature of Treasurer	Nancy H. Watk	cins		[Electronicali	ly Filed]	Date 07	M / D 12	D / Y	2016
NOTE: Submission of fa	alse, erroneous, or	incomplete infor	mation may su	bject the per	rson signing th	nis Report to	the penaltie	s of 2 U.	S.C. §437g.
Office Use								FORN ev. 12/200	

OF FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
CardioVascular Coalition, Inc. Politic	al Action Committee	
Report Covering the Period: From: 04	01 / 2016 To:	06 30 / 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		0.00
(b) Cash on Hand at  Beginning of Reporting Period	462.15	
(c) Total Receipts (from Line 19)	7000.00	7500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7462.15	7500.00
7. Total Disbursements (from Line 31)	2433.05	2470.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5029.10	5029.10
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
Fo	or further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### CardioVascular Coalition, Inc. Political Action Committee

	COLUMN B Calendar Year-to-Date	COLUMN A Total This Period	I. Receipts	
Than Political Committees (i) Itemized (use Schedule A)	1		Contributions (other than loans) From:	1. Cor
(ii) Unitemized (use Schedule A)			(a) Individuals/Persons Other	(a)
(ii) Unitemized			Than Political Committees	
(iii) TOTAL (add Lines 11(a)(i) and (iii)	7500.0	7000.00	(i) Itemized (use Schedule A)	
(iii) TOTAL (add Lines 11(a)(i) and (iii)		0.00		
Lines 11(a)(i) and (ii)	0.0	0.00		
(b) Political Party Committees	7500.0	7000.00		
(c) Other Political Committees (such as PACs)	7300.0	7000.00	Lines 11(a)(i) and (ii)▶	
(c) Other Political Committees	0.0	0.00	//- Delitical Deuts Committees	/I= \
(such as PACs)	7	0.00		
(Such as PACs)	0.0	0.00	` '	(C)
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)			· ·	(4)
Totals to Line 33, page 5)				(u)
2. Transfers From Affiliated/Other Party Committees	7500.0	7000.00		
Party Committees		7		) Trai
3. All Loans Received	0.0	0.00		
I. Loan Repayments Received			arty committees	· ai
I. Loan Repayments Received	0.0	0.00	All Loans Received	B. All
Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		7		
Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.0	0.00	Loan Ponayments Received	1 100
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	7	0.00		
(Carry Totals to Line 37, page 5)				
S. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.0	0.00	· · · · · · · · · · · · · · · · · · ·	
to Federal Candidates and Other Political Committees	9 9	5		
Political Committees				
7. Other Federal Receipts (Dividends, Interest, etc.)	0.0	0.00		
(Dividends, Interest, etc.)		7		
3. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0.0	0.00	· · · · · · · · · · · · · · · · · · ·	
(a) Non-Federal Account (from Schedule H3)				
(from Schedule H3)			(a) Non-Federal Account	(a)
(b) Levin Funds (from Schedule H5)	0.0	0.00	` '	
(c) Total Transfers (add 18(a) and 18(b))  Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶  7000.00				
(c) Total Transfers (add 18(a) and 18(b))  9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶  7000.00	0.0	0.00	(b) Levin Funds (from Schedule H5)	(b)
<ul> <li>7000.00</li> <li>7000.00</li> <li>7000.00</li> </ul>	7	7	(-)	(~)
0. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ 7000.00	0.0	0.00	(c) Total Transfers (add 18(a) and 18(b))	(c)
	7500.0			
Total Fodoral Possints			Total Fodoral Possints	Tota
. Total Federal Receipts (subtract Line 18(c) from Line 19)▶ 7000.00	7500.0	7000 00	· · · · · · · · · · · · · · · · · · ·	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul> <li>Operating Expenditures: —         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ul>		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	422.05	470.00
Expenditures(c) Total Operating Expenditures	433.05	470.90
(add 21(a)(i), (a)(ii), and (b))▶	433.05	470.90
2. Transfers to Affiliated/Other Party	200	
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	2000.00	2000.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
-	200	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
That I dilical dollminedd		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(i) I euclai Silaie		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	222	2.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
CAN CAN FEET TOWN		
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2433.05	2470.90
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	2433.05	2470.90

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7000.00	7500.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7000.00	7500.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	433.05	470.90
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	433.05	470.90

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER: PA	AGE 6 OF 10
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c	12
	13 14 15	16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CardioVascular Coalition, Inc. Political Action Committee Full Name (Last, First, Middle Initial) Eric Berger Date of Receipt Mailing Address 9705 Old Country Trace 04 06 2016 City State Zip Code Transaction ID: SA11AI.4111 VA Richmond 23238 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation public affairs Liberty Partners Group Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Julien Date of Receipt Mailing Address 5300 W. Hillsboro Blvd., #107 04 15 2016 City State Zip Code Transaction ID: SA11AI.4117 Coconut Creek FL 33073 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation South Florida Vascular radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tak Kwan Date of Receipt Mailing Address 139 Centre Street, Rm. 307 09 06 2016 City Zip Code State Transaction ID: SA11AI.4131 NY New York 10013 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation n/a not employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	F	OR	LINE	NU	MBER	:	PAGE	:	7	OF	10
Use separate schedule(s)	(0	he	ck only	or	ne)						
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17

	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) CardioVascular Coalition, Inc.		
Full Name (Last, First, Middle Initial)  A. Terry Litchfield  Mailing Address 8818 Robin Drive		Date of Receipt
		04 15 2016
City Des Plaines	State Zip Code IL 60016	Transaction ID : SA11AI.4115  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer  Lifeline Vascular Access  Receipt For:  Primary  General	Occupation health care  Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼  Full Name (Last, First, Middle Initial)  3. Jason McKitrick	500.00	Date of Receipt
Mailing Address 6339 Cavalier Corridor		04 06 2016
City Falls Church	State Zip Code VA 22044	Transaction ID : SA11Al.4108  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Liberty Partners Group	Occupation public affairs	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) Cathleen O'Keefe		Date of Receipt
Mailing Address 8 Locksley Road		05 02 2016
City Danvers	State Zip Code MA 01923	Transaction ID : SA11AI.4119  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	Memo Item
self-employed Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  2000.00	
SUBTOTAL of Receipts This Page (optional)		3500.00
	er only)	

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 8 OF 10 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c **Detailed Summary Page** 

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CardioVascular Coalition, Inc. Political Action Committee Full Name (Last, First, Middle Initial) Andrew Woods Date of Receipt Mailing Address 6500 Abbey View Way 04 2016 City Zip Code State Transaction ID: SA11AI.4113 MD **Baltimore** 21212 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation Liberty Partners Group government consulting Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 7000.00 TOTAL This Period (last page this line number only).....

Transaction   Disbursement   Disb	SCHEDULE B (FEC Form 3X)	Llos congrete cohodule/=\	FOR LINE I	-	PAGE 9 OF 10
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF CAMINTEE (In Full)  CardioVascular Coalition, Inc. Political Action Committee  Full Name (Last, First, Middle Initial)  • eDonations.com  Mailing Address 117 N. Saint Asaph Street  City State Zip Code Alexandria  Cardidate Name  Category' Type  Office Sought: House Primary General  Pripose of Disbursement Online fundraising  Candidate Name (Last, First, Middle Initial)  • eDonations.com  Mailing Address 117 N. Saint Asaph Street  City State Zip Code VA 22314  Pripose of Disbursement online fundraising  Candidate Name  Category' ▼  Date of Disbursement  Other (specify) ▼  Transaction ID: S8218.4124  Amount of Each Disbursement  Date of Disbursement  Other (specify) ▼  Transaction ID: S8218.4124  Amount of Each Disbursement  Category' 129.59  Memo Item  Transaction ID: S8218.4129  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  State: Disbursement  Candidate Name  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  State: Disbursement  Candidate Name  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  State: Disbursement  Candidate Name  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  State: Disbursement  Candidate Name  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item  Category' 129.59  Memo Item  Amount of Each Disbursement this Period  Category' 129.59  Memo Item	ITEMIZED DISBURSEMENTS		<b>X</b> 21b	22 23	
NAME OF COMMITTEE (in Full) CardioVascular Coalition, Inc. Political Action Committee  Full Name (Last, First, Middle Initial) eDonations.com  Mailing Address 117 N. Saint Asaph Street  City Absandria Pripose of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Beanate Primary Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) State: F					
A eDonations.com  Mailing Address 117 N. Saint Asaph Street  City State Zip Code VA 22314  Pripose of Disbursement online fundraising  Candidate Name  Category/ Office Sought: House Primary General Primary General Primary General Primate Grandidate Name  City State Zip Code Memolitem  President Disbursement this Period Office Sought: House Senate Primary General	NAME OF COMMITTEE (In Full)	, ,		Solicit Contributions	5 HOTH SUCH COMMITMEE.
Malling Address 117 N. Saint Asaph Street  City	_			Data of Diabura	omant
City	eDonations.com				
Alexandria Purpose of Disbursement online fundraising Candidate Name Office Sought:	Mailing Address 117 N. Saint Asaph Street			05	2016
online fundraising Candidate Name  Category/ Type    Memo Item	Alexandria	· ·		Transaction ID	) : SB21B.4124
Office Sought:				Amount of Each	Disbursement this Period
Office Sought:	Candidate Name				303.46
Full Name (Last, First, Middle Initial)  Purpose of Disbursement Office Sought:  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code VA  Z2314  Purpose of Disbursement online fundraising  Candidate Name  Category/ Type  Disbursement For: Senate President  City State  Zip Code Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Date of Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  Category/ Type  Office Sought:  Date of Disbursement  Category/ Type  Office Sought:  House Senate Primary General Category/ Type  Office Sought:  House Senate Primary General Other (specify)  Wemo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Office Sought:  District:  Amount of Each Disbursement this Period  Office Sought:  Office Sought: Office So	Senate	Primary General	1,500	Memo Item	
Date of Disbursement    Date of Disbursement					
City	_				
Alexandria  VA 22314  Purpose of Disbursement Candidate Name  City  State  Candidate Name  City  State  Candidate Name  Category/  Full Name (Last, First, Middle Initial)  Candidate Name  Category/  Full Name  Category/  City  State  Category/ Type  Memo Item  Memo Item  Memo Item  Additional Category/ Type  Memo Item  Additional Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Additional Category/ Type  Amount of Each Disbursement this Period	Mailing Address 117 N. Saint Asaph Street			06	2016
Online fundraising Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Category/ Type  Memo Item  Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Substock Amount of Each Disbursement this Period	•			Transaction ID	) : SB21B.4129
Office Sought: House Senate Primary General Other (specify) Type  State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Office Sought: House Senate Primary General Other (specify) Type  Office Sought: Disbursement For: General Other (specify) Memo Item  State: District: 433.05				Amount of Each	Disbursement this Period
Office Sought: House Senate Primary General Other (specify) State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify) Memo Item  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Memo Item  State: District:  Substrate Other (specify) 433.05	Candidate Name				129.59
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Primary General Other (specify)  State: District:  Subtrotal of Disbursements This Page (optional)	Senate	Primary General	1,500	Memo Item	,
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Substruct: Amount of Each Disbursement this Period  Memo Item  433.05					
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)	C.				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Substotal of Disbursements This Page (optional)	Mailing Address				
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Substotal of Disbursements This Page (optional)	City	State Zip Code			
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substruct: Memo Item  433.05	Purpose of Disbursement				
Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  Substruct: Disbursements This Page (optional)	Candidate Name				
SOBTOTAL OF DISDUISEMENTS THIS I age (Optional)	Senate President	Primary General	,,		
SOBTOTAL OF DISDUISEMENTS THIS I age (Optional)					433.05
	SOBTOTAL OF DISDUISEMENTS THIS Page (optional)		<u> </u>		433.05

TENUZED DICCHIOCENTENTO	Use separate	schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each cate Detailed Sum	gory of the	(check only 21b 27	one)  22 X 23 24 25 26  28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)  CardioVascular Coalition, Inc. Politi				Solicit Contributions from Scott Contributes.
Full Name (Last, First, Middle Initial)				
A. Friends of Erik Paulsen				Date of Disbursement
Mailing Address P. O. Box 44369				05 05 2016
Eden Prairie		Code 5344		Transaction ID : SB23.4125
Purpose of Disbursement		[		Amount of Each Disbursement this Period
Candidate Name Erik Paulsen			Category/ Type	1000.00
Senate	nent For: 2016 Primary Other (specify)	General		Memo Item
State: MN District: 03  Full Name (Last, First, Middle Initial)				
3. Friends of Erik Paulsen				Date of Disbursement
Mailing Address P. O. Box 44369				06 15 2016
,		Code 5344		Transaction ID : SB23.4128
Purpose of Disbursement		Γ		Amount of Each Disbursement this Period
Candidate Name Erik Paulsen			Category/ Type	1000.00
Office Sought:    House   Disburser	nent For: 2016 Primary Other (specify)	General	.,,,,,	Memo Item
State: MN District: 02				
State: MN District: 03  Full Name (Last, First, Middle Initial)  C.				Date of Disbursement
				Date of Disbursement
Full Name (Last, First, Middle Initial)  Mailing Address	State Zip	o Code		
Full Name (Last, First, Middle Initial)  Mailing Address	itate Ziņ	o Code		
Full Name (Last, First, Middle Initial)  Mailing Address  City	State Zip		Category/	Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial)  Mailing Address  City S  Purpose of Disbursement  Candidate Name  Office Sought: House Senate		General	Category/ Type	M M / D D / Y Y Y Y
Full Name (Last, First, Middle Initial)  Mailing Address  City S  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President	nent For: Primary Other (specify)	General ▼	Type	Amount of Each Disbursement this Period